The state of the s	e spaced for elite typ		(inch).			(Form Approve		58-58000	04
FORM	CDA		IRONMENTAL PI IS WASTE PE	RMIT A	PLICAT		I. EPA I.D. I	NUMBER		
RCRA-	CFA	(This informat	Consolidated Perri ion is required und	-		RA.)	F			13 12
	AL USE ONLY		All the same	desident					国旗的	利尼亚之中
APPROVED	(yr. mo & day)				co	MMENTS		(1)a	(691)	10
23	24 29			17.			20) 19	87
	REVISED APPL						《			
revised applicati	the appropriate box ion. If this is your fi er in Item I above.	irst application and	you already know	your facility	is EPA I.D.	is is the first ap . Number, or il	phication you a this is a revised	re submitting application,	for your enter you	facility or ir facility's
A. FIRST API	PLICATION (place			- ,		2.2		.(4)		- 111
X 1. EXIS	STING FACILITY (See instructions for Complete item belo	definition of "exis w.)	sting" facilit	у.		2.NEW FAC	ILITY (Comp		below.)
\$\begin{array}{c c} \cdot \frac{\frac{1}{2}}{8} & \frac{1}{7} & \frac{1}{8} & \frac{1}{2} \end{array}	OPE	R EXISTING FACIL RATION BEGAN C the boxes to the lef	R THE DATE CO	THE DATE	(yr., mo., & On COMM)	& day) Enced	YR. MO.	1 ° 4 'Y'	., mo., & 0 ON BEGA	HE DATE day) OPER IN OR 15 TO BEGII
_	APPLICATION ()	IM STATUS		·	=					(No. 18 8
71	SES - CODES AN	AL	ENDED APPL		10274268	rich a personal	Z. FACILIT	Y HAS A RC	RA PERN	ALT Garage
A. PROCESS C	ODE - Enter the co	ode from the list of p	process codes below	w that best d	escribes ea	rin process to h	a usad at the fa	cility. Tan tir	er are nr	ouided for
entering cod	les. If more lines are process (including it	e needed, enter the c	ode(s) in the space	provided. I	f a process	will be used th	et is not includ	ed in the list of	of codes k	pelow, then
	ESIGN CAPACITY	4.5	the second second							
1. AMOUN 2. UNIT OF	T — Enter the amous F MEASURE — For s	nt. each amount entere	d in column B(1).	enter the cod		1.0	regular menggalege	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		unit of
measure	used. Only the unit	s of measure that are	e listed below shou RIATE UNITS OF	iid be used.	the la	-: (66)	September 185	A Comment	· 1 - 2 - 1	
PR	OCESS	CESS MEASUR	E FOR PROCESS ON CAPACITY	LUY-	DD:	OCESS	CESS		FOR PF	ROCESS
Storage:	- Land Company	فالعوار		Trea	tment:		7 to 1 to 1 to 1 to 1	DESIG		A R CONTRACTOR
TANK WASTE PILE	(barrel, drum, etc.)		OR LITERS OR LITERS	TAT	200	OUNDMENT	T01	LITERS PE	PER DAY	OR
1	POUNDMENT	CUBIC ME			INERATO		T03	LITERS PEI TONS PER	R DAY	R
Disposal:	VELL	D79 GALLONS	OR LITERS	Cir.				METRIC TO GALLONS I LITERS PEI	PER HOL	HOUR: JR OR
LANDFILL		D80 ACRE-FEE would cove	T (the volume that r one acre to a se foot) OR	ther	mal or biol	or physical, chi ogical treatmen	it .	GALLONS !		OR
LAND APPLI		HECTARE DB1 ACRES OF	METER HECTARES	surfi ator	ice impoun s. Describe	ccurring in tan dments or inci the processes	ner- in	USE	EPA RCRA	
SURFACE IM	POUNDMENT	LITERS PE	PER DAY OR R DAY OR LITERS	. the	space provii	ded; Item III-	CL) -	30	58053	
		UNITOF		411	UIN	IT OF		Tyen was in		UNITOF
UNIT OF ME		MEASURE CODE	UNIT OF MEA			ASURE ODE		ASURE		MEASURI -CODE
LITERS	· · · · · · · · · · · · · · · · · · ·	L	TONS PER HO	UR		. D	ACRE-FEET HECTARE-A	ETER		F
CUBIC METE	RS	c	METRIC TONS GALLONS PER LITERS PER H	HOUR		. E	ACRES HECTARES			В
EXAMPLE FOR	R COMPLETING IT: 400 gailons. The fac	EM III (shown in lin	e numbers X-1 an	d X-2 below	I. A facilin	v has two stor	age tanks, one ta	ank can hold	200 galio	ns and the
Č.		*/A * \	1 1 1 1	1 1	garrons per	1 1	1.1.1	7.7.7	1.1	11
X IZ	DUP	13 14 15	1111	11	11,	111	1111	17		1//
MA.PRO-	B. PROCESS	DESIGN CAPAC	FC	OR E	A.PRO-	B. PRO	CESS DESIG			FOR
Z (from list		OUNT cify)	OF MEA-UFF	ICIAL BE	CODE (from list	4.4	1. AMOUNT		F MEA- SURE	OFFICIA USE
그를 above)		2	code)		above)	The semiliarity		27	(enter	ONLY
X-1 S 0 2	600		G	5					26	29
X-2 T 0 3	20	0	E	6						
1 D 8 O	17.906	6	N -	7						
2				8					- 2	S.
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FPA Form 3510		T.	11 11	- 12	- 114			27	2.0	29

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		-																
A. Ef	A	H. le	AZ ha:	Al zar	dou	SU IS 1	OF HAZARDOUS WASTE S WASTE NUMBER — Enter wastes which are not listed in 4 ic contaminents of those hazard	the f	-R. S	ubpa	num irt D	101 , e	r fro	om the	40 fou	ČFR, S ur—digi	Suppert [t number	D for each listed hazardous waste you will handle. If you er(s) from 40 CFR, Subpart C that describes the characteris-
B. E:	STI	MA F	AT	EI ea	ch i	NA cha	IUAL QUANTITY - For each	liste t ent	d wa	ste e	umr	١A	esti	mat	nn e ti	A estin	nate the d annual c	e quantity of that waste that will be handled on an annual quantity of all the non-listed waste/s/ that will be handled
ວ. ບ	NI.	Ċ)F	M	EΑ	SU	RE - For each quantity entere	ed in	colu	mn E	3 ent	ær	the	uni	t of	f meesu	ire code.	e. Units of measure which must be used and the appropriate
						IG	LISH UNIT OF MEASURE			4.4			- 1			MET	RIC UNI	NIT OF MEASURE CODE
1f	fa	-ili	tv	re			Succession of the section of the sec									MET	RIC TO	ONS. L
ad D. P.	CO	uni	C CF	18 8	.pp	LOI 13	priate density or specific gravity	of the	ie wa	ste.	ne u	nıı	S OI	me	asu	re mus	De convi	everted into one of the required units of measure taking into
S. P.C.S.	F to F c th	or or ont nat lot	lis noi tair ch e:	cat on- nec nam F	hate had in acts our	ow ed li ris si t b	hazardous wastes: For each of the standard series and the proof the standard series and the proof the standard series are provided for entering ox of Item IV-D(1); and (3) Entering the standard series are provided for entering the standard series are standard series and series are standard series and series are standard series are standard series and series are standard series are standard series are standard series and series are series are standard series and series are standard series are standard series are standard series and series are standard series are standard series are series are standard series are standard series are ser	ed, and characterses pro proter in	cteris that cess the	dispo tic o will code space	be used	of cic use mo	at the	tam sto are i	ina re, need age	nt ente treat, a ded: (1 4, the	red in co and/or dis Enter t line numb	code(s) from the list of process codes contained in Item III column A, select the code(s) from the list of process codes dispose of all the non-listed hazardous wastes that possess the first three as described above; (2) Enter "000" in the inber and the additional code(s).
NOT more 1.	th S	H. ele uai	AZ on ect nti	ZA: e 6 on ty um	PA e o of 1 n A	OU f t he o	IS WASTES DESCRIBED BY Mazardous Waste Number shall be the EPA Hazardous Waste Number waste and describing all the pro-	MOR e desc ers a cesso EPA ries o	E THeribed nd er les to	AN don to the use of t	ONE the f t in c ed to is Wi	orr coli	PA In as umn reat, e Nu	foli A. stoumb	ZAF Own On re, a er t	RDOUS s: the san and/or that ca	ne line co dispose on be usec	E NUMBER — Hazardous wastes that can be described by complete columns B,C, and D by estimating the total annual of the waste. ed to describe the waste. In column D(2) on that line enter
ste c	orr	osi	r c	nro on	ly a	ะ รถ	vavings from leather tanning an	od tin	unds unds	g ope per v	ratic /ear	of.	In a	ddit w	tion asta	i, the fa	cility wil	A facility will treat and dispose of an estimated 900 pounds vill treat and dispose of three non-listed wastes. Two wastes aste is corrosive and ignitable and there will be an estimated III.
ш		A.	. E	PAR	١		B. ESTIMATED ANNUAL	C.L	HEA-			_			<u> </u>			D. PROCESSES
NON					NO ie)	-	QUANTITY OF WASTE	(e)	RE iter de)		7	1	PR		ESS ntei	CODE	S	2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	I		0	5	4		900		P	T	0 3	3	$D'\delta$	3 0		34		
X-2	I	2	0	0	2		400		P	T	0 3	3	$D^{-} \delta$	3 0		1 1	1	
X-3	Z) (0	0	1		100		P	T	0 3	3	DE	3 0	July (2	
X-4	1		0	0	2	ì				1	Š		1	1		11		included with above
PAI	-01	-	35	10	31	6-5	20)	-	-	1			<u> </u>				1	CONTINUE ON BACE

III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

	PA	1.5	۸.۲	UM	BER (enter from page 1)			/		,		FC	OR OFFIC	IAL USE	
W 1 2	_				13 14 13	'.	\ \		W I	2			DUP		2 DUP
IV. I	DES	CF	NΡ	TIC	N OF HAZARDOUS WAST				nued	1)	200	-	***	SHOW THE STATE OF	A Company of the Comp
LINE NO.	Ιч.	A. I AZ. AST	Δ =	D. NO. dej	B. ESTIMATED ANNUAL QUANTITY OF WASTE	0	UN FMI SUR Code	EA- E er e)				(er	ISS CODE		D. PROCESSES 2. PROCESS DESCRIPTION (if a code is not entered in D(1))
1	23_ K	0	0	1	190 MINIMUM		э <u>е</u> Т		D			. 8	11 - 25	27 - 28	BOTTOM, MULTI-CONE AND BAGHOUSE
2	D	0	0	4	TO					1			1.1		ASH FROM WASTE WOOD BOILER PLANT
3					240 MAXIMUM				1	1	'				CONTAMINATED WITH RESIDUE FROM BURNING OF KOO1 SLUDGE AND,
4					OF			-		r	1		1 1	1	THROUGH SYSTEM UPSET, CCA SLUDGE
5					BOILER ASH						,	7	1 1	Y .	
6								7-	1	1	'	1	1 1	, ,	
7						13			1		1			*	
8								22	-	1	1	1			
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11					1			1	'	1	1		* 1	7.7	
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E	PA I.D	. NO.	(enter	from	page	1)		
		1	TT	1 1		T	7/4	
			1 1					
+		-	 _			- 12		Н

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

VII. FACILITY	GEOGRAPHIC LOCATION

	LATITUDE (degrees, minutes, & seconds)	LONGITUDE (degrees, minutes, & seconds)
***	4 5 4 9 5 0	1 2 2 4 2 0 1
III FACILIT	Y OWNER	

A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

THE PART OF THE PART OF THE PERSON OF THE PART OF THE

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FA	CILITY'S LEGAL OWNER	2. PH	IONE NO. (area code & no.)
E ELMER C. MUFFETT		2 0	6 - 8 8 7 - 3 1 3 0
3. STREET OR P.O. BOX	4. CITY OR TOWN	5. ST	6. ZIP CODE
F 3510 N.W. 289th St.	G RIDGEFIELD	WA	98642
119 .	25 10 19	AV AT AT	47 - 51

IX. OWNER CERTIFICATION

1 certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

C. DATE SIGNED

ELMER C. MUFFETT

5/19/83

X. OPERATOR CERTIFICATION

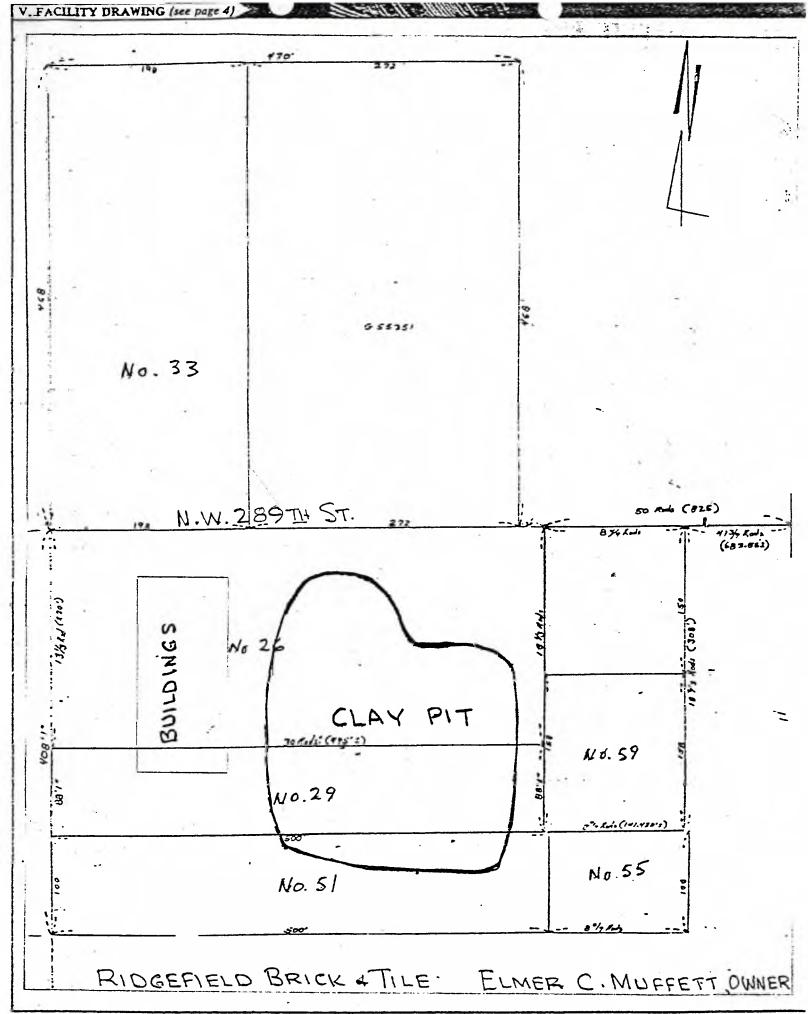
I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (Print or type)

MARK T. MOOTHART TREASURER / GENERAL MANAGER

C. DATE SIGNED

5/19/83



PACIFIC WOOD TREATING CORPORATION

P.O. BOX 518/111 W. DIVISION ST./RIDGEFIELD, WA 98642 PHONE: (206) 887-3562; FROM PORTLAND: 283-3017

PACKAGES, CORRESPONDENC AND INVOICES REGARDIN THIS ORDER.

SHOW THIS NUMBER

41073

TO: SWEET, EDWARDS & ASSOCIATES P.O. Box 328 KELSO, WASHINGTON 98626

SHIP TO:

05-13-83	Net	ws 30 Days		DATE REQUIRE AT P.W.T. PLANT
PHONE 423-3580	SALE		TAXABLE-FOR OUR OWN USE FOR RESALE FOR OUT OF STATE USE AND IS OUR OWN USE FOR RESALE NOT SUBJECT TO WASHINGTON SALES TAX N/A	See Below
ITEM QUANTITY	UNIT	PART NUMBER	DESCRIPTION	AMOUNT
. 1	Lot		Disposal Site Hyrdogeological/Monitoring Evaluation,	11
i			PHASE I, as follows:	
10		1.	Evaluate waste stream and potential leachate/monitoring	g
			constituents as related to regulatory requirements.	
		2	Review published soils/geologic data.	
		3.	Field locate beneficial water uses; - surface water rights	
			- water wells/logs.	1
i		4	Develop local water table potentiometric surface map; - survey or project measuring point elevations.	İ
			- measure depth(s) to water.	
		5.	Evaluate potential for use of existing adjacent wells for incorporation in monitoring network.	
1		6.	Recommend monitoring layout, sampling specifications an	a l
			parameters for testing in a summary report (5 copies).	
		7.	Meet with Pacific Wood Treating staff and regulatory agency personnel to finalize the monitoring plan.	
			(continued on page 2 - Invoice 41073)	

"The provisions of Executive Order 11246 and amendments thereto, are here-by incorporated by reference, and the seller represents, by acceptance of this purchase order, that he will comply with such regulations."

INVOICE IN DUPLICATE

PACIFIC WOOD TREATING CORPORATION

VENDOR CORY

PACIFIC WOOD TREATING CORPORATION PO. BOX 518 /111 W. DIVISION ST. / RIDGEFIELD, WA 98642 PHONE: (206) 887-3562; FROM PORTLAND: 283-3017

AND INVOICES REGARDING THIS ORDER.

SHOW THIS UMBER

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(Pge 2 of

41073

TO:

SWEET, EDWARDS & ASSOCIATES P.O. BOX 328
KELSO, WASHINGTON 98626

"The provisions of Executive Order 11246 and amendments thereto, are hereby incorporated by reference, and the seller represents, by acceptance of this purchase order, that he will comply with such regulations." SHIP TO:

	TERM	S	SHIP VIA					DATE REQUIRE
05-13-83	Net	30 Davs	N/A				1	AT P.W.T. PLANT
PHONE	WASH	INGTON STATE	TAXABLE-FOR OUR OWN USE FOR RESA	FOR DUT OF STATE USE A	ND IS	F.O.B.		
423-3580		4 000 753	_ <u>Q</u>			N/A		See Rela
ITEM QUANTITY	UNIT	PART NUMBER		DESCR	RIPTION			AMOUNT
			DUAGE					-0
4 0			PHASE I - co	ntinued				1
		8.	Assess curre	nt hazards/liab	ility ev	aluation and	doptions	s.
-		9.	Assistance i	n evaluating:				
			- Removal t	O secure site			-	
		•	- Closeout					
			Topogr	ephy				
			Materi	als Balance				
			Moistu	re Balance with	Grading	and Drainac	7.0	i
							,	
					J			
								1
				CES NOT TO EXCE				\$2400.00
			PHASE I SERVI	CES NOT TO EXCE	ED .			\$2400.00
			PHASE I SERVI	CES NOT TO EXCF	ED ·	y not be inc	luded	\$2400.00
			PHASE I SERVI	CES NOT TO EXCENT OF THE CENTRAL TERMS OF THE CENTR	ED ay or ma	.00. Vendor	is to	\$2400.00
			PHASE I SERVI It is agreed in the not to advise and a	CES NOT TO EXCENT OF THE CONTROL OF	ED ay or ma of \$2400 order w	.00. Vendor	is to	\$2400.00
			PHASE I SERVI It is agreed in the not to advise and a	CES NOT TO EXCENT OF THE CENTRAL TERMS OF THE CENTR	ED ay or ma of \$2400 order w	.00. Vendor	is to	\$2400.00
			PHASE I SERVI It is agreed in the not to advise and a	CES NOT TO EXCENT OF THE CONTROL OF	ED ay or ma of \$2400 order w	.00. Vendor	is to	\$2400.00
			It is agreed in the not to advise and a required or details.	CES NOT TO FXCF d that item 9 m exceed figure of suitable change eemed advisable	ay or ma of \$2400 order w	.00. Vendor	is to	\$2400.00
	• • •		It is agree in the not to advise and a required or decomposition.	CES NOT TO EXCENT OF THE CHARGE CHARCE CHARGE CHARCE CHARGE CHARCE CHARC	ay or ma of \$2400 order w	.00. Vendor	is to	\$2400.00
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	• • •		It is agreed in the not to advise and a required or decomposition.	CES NOT TO EXCE d that item 9 m exceed figure of suitable change eemed advisable rbal order of or s Quotation of N	ay or ma of \$2400 order w	.00. Vendor ill he issue McQuiggin a , 1983.	is to	\$2400.00
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VENDOR COPY

